## 

Working People PAC 122 Broadway St. Meyersdale, PA

Committee Name: Working People PAC

Date: July 9, 2014

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Hybrid PAC

To Whom It May Concern:

This committee intends to structure itself as a hybrid PAC and to make independent expenditures consistent with the Federal Election Commission agreement to a stipulated order and consent judgment dated August 19, 2011 in *Carey v. FEC*, Civ. No. 11-259-RMC (D. D.C. 2011), it therefore intends to deposit contributions into a "Non-Contribution Account".

Respectfully submitted,

Carl J. Robb, Treasurer

## FEC FORM

-AOM-CAGH990

## STATEMENT OF ORGANIZATION

RECEIVED

FURIVI I			77 Onting 10 sh oh 5 AM 9: 06		
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5 FEC MAIL CENTER		
MORKING PE	O.P.C.E. PAC.				
	<u> </u>				
ADDRESS (number and street)	1/12/21 BIRICIAIDIMAIXI SITI				
(Check if address is changed)					
	MEYERSDALL	E	P_  #		
OMMITTEE'S E-MAIL ADDRI	ESS				
(Check if address is changed)	WO.R.K.I.N.G.P.E.O.P.L.E.P.B.C.P.G.MA.I.L.O.C.O.M				
<b>.</b>	Optional Second E-Mail Address				
		<u>., , , , , , , , , , , , , , , , , , , </u>			
	;				
COMMITTEE'S WEB PAGE AD	• •				
(Check if address is changed)	WOKIKI / WG PIE	OPCIENT HICLOICE	D <sub>1</sub> /M		
		111111			
2. DATE 0 7 0	9 2014				
3. FEC IDENTIFICATION N	UMBER > C				
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
certify that I have examined	this Statement and to the best	of my knowledge and belief	it is true, correct and complete.		
Type or Print Name of Treasur		ROBB			
Signature of Treasurer	Carl of Fall		Date 0.7 0.9 2014		
NOTE: Submission of false, error	neous, or incomplete information r		this Statement to the penalties of 2 U.S.C. §437g. WITHIN 10 DAYS.		
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100			

Pao	e	2

140K1261991

TYPE	E OF C	COMMITTEE		
Can		e Committee:		
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)		
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)		
Namo	e of lidate	<u> </u>		
Cand Party	lidate Affiliati	Office Senate President  District		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name Cand	e of lidate			
Part	ty Con	nmittee:		
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.		
Poli	tical A	ction Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:		
		Corporation Corporation w/o Capital Stock Labor Organization		
		Membership Organization Trade Association Cooperative		
		In addition, this committee is a Lobbyist/Registrant PAC.		
<b>(f)</b>	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)		
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
		E-uis		
Join	t Fund	draising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.		
	Committees Participating in Joint Fundraiser			
	1.	FEC ID number C		
	2.	FEC ID number C		
	3.	FEC ID number		
	4.			

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	ie	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundralsing Representative, or	or Leadership PAC Sponsor
MOMELLIL		
		11111111
Mailing Address		111111111
	CITY STATE	ZIP CODE
Relationship:	ed Organization Affiliated Committee Joint Fundraising Representati	ve Leadership PAC Sponsor
7. Custodian of Records: Ide books and records.	entify by name, address (phone number - optional) and position of the per	rson in possession of committee
Full Name CIAR	2.5.ROBB	
Mailing Address	1/12/2 BIRIOIDIMAIK ISITI	
		<u> </u>
	MEYERSDALE PA	1/15/15/5/2-
Title or Position	CITY STATE	ZIP CODE
[C, H, B, I, R, M, B, M,	Telephone number $[oldsymbol{\mathcal{B}}_{L}]$	1, <del>1</del> 1-13,8,61-18,6 <i>5,6</i>
8. Treasurer: List the name a any designated agent (e.g.,	nd address (phone number - optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name of Treasurer	2. J. ROBB.	
Mailing Address	1/12:21 BIRIOIA DIMAIS ISIT	
	MEYERSDALE PA	1/5552
Title or Position	CITY STATE	ZIP CODE
CHAILRMAN	Telephone number $ \mathcal{B}_1 $	<u> </u>

FEC Form 1 (Revis	sed 02/2009)	Page 4
Full Name of Designated Agent	22 15 1R101B1B1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Mailing Address	1/22 BROADWAY SITI	
	MIEIMEIRIS DIBILIE III F	PM //SSSIZI-
Title or Position		
C.H.A.L.RIMAN	Telephone number	181114-1318161-181615161
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.		
F11.	PISIT, NATITIONALAL BAINT OF P	ENNISPENDA
Mailing Address	229 BAUMUST	
	MIEIYIEIRISIDIALIEI	PA 1/55512

Name of Bank, Depository, etc.

Mailing Address

LITY STATE ZIP CODE

STATE

ZIP CODE

CITY

HACKHOOHOOM

10 JUL 2014 PM 3 T

JOHNSTOWN PA 159

RECEIVED

difelementaling the paint of the entire terminate of the property of the prope

COMMISSION CENTER 20463 AM 9:06 ELECTION 00 999 E STREET WASHING TON, FEDERAL

PEYEKSDALE, PA 155 ROBB BROMD WAY

PREPARER (8/2013)

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked USPS First Class Mail Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):